

Louisiana Department of Health and Hospitals BAYOU HEALTH Informational Bulletin 12-18

February 18, 2013

Issue: Billing for Behavioral Health Services for Bayou Health Members

Enrollees in Bayou Health Shared Savings Plans (Community Health Solution, UnitedHealthcare Community Plan) and Prepaid Plans (Amerigroup, LaCare, Louisiana Healthcare Connections) will receive most **behavioral health services** through the Louisiana Behavioral Health Partnership (LBHP) that is managed by Magellan. This Bulletin is to provide information on whether Bayou Health, Magellan, or Molina (legacy Medicaid) should receive the claim for behavioral health-related services provided to Medicaid recipients.

In order to bill any of the Bayou Health prepaid health plans: Amerigroup, LaCare, Louisiana Healthcare Connections, or Magellan a provider must be contracted with the appropriate plan(s) or prior authorized to provide out of network services. To bill either the two Bayou Health Shared savings plans or Molina for legacy Medicaid the provider must be enrolled and in good standings with Louisiana Medicaid.

For specific problem resolution, Providers are encouraged to contact the Network Provider Line at 1-800-424-4396.

• Billing for "Basic" Behavioral Health Services Provided in PCP Offices

Claims for basic behavioral health services for Bayou Health members should be submitted to **the Bayou Health Plan**. Basic mental health services are defined as those provided by a provider who is **not** a mental health professional. Mental health professionals include but are not limited to social worker, psychiatrist, psychologist, psychiatric nurse practitioner, addiction counselor, licensed professional counselors, marriage and family therapist, mental health clinic, and specialized mental health agencies.

Basic behavioral health services may further be defined as those provided in the member's PCP or medical office by the member's (non-specialist) physician (i.e., DO, MD, ARNP) as part

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of routine physician evaluation and management activities (e.g., CPT codes 99201 through 99204).

Behavioral Health Services When Place of Service is a Federally Qualified Health Center (FQHC)

Claims for behavioral health services that are provided in an FQHC should be submitted to the:

- Bayou Health Plan if the patient is a member of Amerigroup, LaCare, or Louisiana Healthcare Connections on the date of service, or
- Magellan if the patient is a member of Community Health Solutions (CHS) or United Healthcare Community Plan (UHC) on the date of service.

NOTE: The FQHC should be contracted with the respective member's Bayou Health Plan and/or Magellan to provide services.

Behavior Health Services When Place of Service is a Rural Health Clinic (RHC)

All claims for behavior health services that are provided in an RHC should be submitted to the Bayou Health Plan (either Prepaid or Shared) regardless of the nature of the service that is being provided.

Emergency Room Services with Primary Diagnoses of 290.xx through 319.xx *

Both Facility and Professional claims for ER services with a Primary Diagnosis of 290.xx through 319.xx should be sent to Magellan for processing and payment, regardless of whether the provider has a contract with Magellan- All other ER diagnoses claims should be submitted to the member's Bayou Health Plan.

Lab and Radiology Claims When the Diagnosis Code is 290.xx through 319.xx*

If lab and radiology services are performed in the facility and are provided as part of an Inpatient stay or ER visit they should be billed as revenue codes on the claim and are billed to Magellan.

If lab and radiology services are provided outpatient but performed by a Mental Health Free-standing hospital or a Distinct Part Pysch Unit, then the claim should be submitted to Magellan.

All other lab and radiology services **provided outpatient** by free standing independent or acute care facility based lab should be billed to the member's Bayou Health Plan or Molina if Legacy Medicaid, regardless of the ordering physician--Mental Health or Non-Mental.

Hospital Inpatient Claims with Acute Detoxification

Acute detoxification claims (Revenue codes of 116, 126, 136, 146, 156 as well as 202 and 204 with DT diagnoses to accommodate for Delirium Tremens (DT)) should be submitted to the **Bayou Health Plan of the patient if on the date of service the patient was enrolled in Amerigroup, LaCare, or Louisiana Healthcare Connections**. These claims should be submitted to **Magellan** for patients, who on the date of service, were enrolled in UnitedHealthcare or Community Health Solutions (or in legacy Medicaid).

Hospital Inpatient and Outpatient Claims Other Than Acute Detoxification

With Primary Diagnoses Codes between 290.xx and 319.xx -*

- Any inpatient hospital claim (either general, psychiatric unit or standalone) should be sent to Magellan, including professional, lab, and radiology services provided during admission/visit
- Outpatient Hospital Clinics providing primary care by a provider who is not a Mental Health Professional, should submit these basic claims to the member's Bayou Health Plan or Molina if Legacy Medicaid.

With Primary Diagnoses Codes other than between 290.xx and 319.xx -*

- Submit Claims to the recipient's Bayou Health Plan or Molina (legacy Medicaid), as appropriate
- Includes professional, lab, and radiology services during admission/visit

All Other Covered Behavioral Health Services

Mental health and substance abuse services for Bayou Health members not listed above are included in Louisiana Behavioral Health Partnership and claims should be submitted to Magellan.

Billing for Transportation Services

Transportation CLAIMS for basic behavioral health services as defined above should be submitted to the Bayou Health Plans if the patient is a member of Amerigroup, LaCare or Louisiana Healthcare Connections on the date of service or to Molina if the patient is a member of Community Health Solutions, United Health Care Community Plan or legacy Medicaid on the date of service.

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• For specialized behavioral health services for ALL recipients, claims should be submitted to Molina for processing.

Excluded Diagnnoses not payable by Magellan

299.0 INFANTILE AUTISM 299.01 INFANTILE AUTISM-RESID 299.10 DISINTEGR PSYCH-ACTIVE 299.11 DISINTEGR PSYCH-RESIDUAL 299.80 CHILD PSYCHOS NEC-ACTIVE 299.81 CHILD PSYCHOS NEC-RESID 299.90 CHILD PSYCHOS NOS-ACTIVE 299.91 CHILD PSYCHOS NOS-RESID 305.1 NICOTINE DEPENDENCE 315.00 READING DISORDER NOS 315.01 ALEXIA 315.02 DEVELOPMENTAL DYSLEXIA 315.09 READING DISORDER NEC 315.1 ARITHMETICAL DISORDER 315.2 OTH LEARNING DIFFICULTY 315.31 DEVELOPMENT LANGUAGE DIS 315.32 RECEPTIVE LANGUAGE DISORDER (MIXED) 315.39 SPEECH/LANGUAGE DIS NEC 315.4 COORDINATION DISORDER 315.5 MIXED DEVELOPMENT DIS 315.8 DEVELOPMENT DELAYS NEC 315.9 DEVELOPMENT DELAY NOS 316 **PSYCHIC FACTOR W OTH DIS** 317 MILD MENTAL RETARDATION 318.0 MOD MENTAL RETARDATION 318.1 SEVERE MENTAL RETARDATION 318.2 PROFOUND MENTAL RETARDATION

MENTAL RETARDATION NOS

Although the above listed diagnoses are not covered by Magellan, Magellan shall not deny access to evaluations and services to an otherwise eligible receipient solely because his or her primary diagnosis is one of the above listed diagnoses.

Codes of Special Exception

Procedure codes 96118, 96150-96155 are payable by Magellan even if no psychiatric diagnosis is present but a neuropsychological condition is suspected or present. These services must be rendered by licensed mental health professionals in order to be covered under Magellan.

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